

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/ 554315

FILING DATE

APPLICANT(S)

**CLAIMS**

|                 | AS FILED |      | AFTER<br>1 <sup>st</sup> AMENDMENT |      | AFTER<br>2 <sup>nd</sup> AMENDMENT |      |
|-----------------|----------|------|------------------------------------|------|------------------------------------|------|
|                 | IND.     | DEP. | IND.                               | DEP. | IND.                               | DEP. |
| 1               |          |      |                                    |      |                                    |      |
| 2               |          |      |                                    |      |                                    |      |
| 3               |          |      |                                    |      |                                    |      |
| 4               |          |      |                                    |      |                                    |      |
| 5               |          |      |                                    |      |                                    |      |
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| 10              |          |      |                                    |      |                                    |      |
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| 26              |          |      |                                    |      |                                    |      |
| 27              |          |      |                                    |      |                                    |      |
| 28              |          |      |                                    |      |                                    |      |
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| 30              |          |      |                                    |      |                                    |      |
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| 32              |          |      |                                    |      |                                    |      |
| 33              |          |      |                                    |      |                                    |      |
| 34              |          |      |                                    |      |                                    |      |
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| 36              |          |      |                                    |      |                                    |      |
| 37              |          |      |                                    |      |                                    |      |
| 38              |          |      |                                    |      |                                    |      |
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| 41              |          |      |                                    |      |                                    |      |
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| 43              |          |      |                                    |      |                                    |      |
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| 47              |          |      |                                    |      |                                    |      |
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| 49              |          |      |                                    |      |                                    |      |
| 50              |          |      |                                    |      |                                    |      |
| TOTAL<br>IND.   |          | ↓    |                                    | ↓    |                                    | ↓    |
| TOTAL<br>DEP.   |          | ←    |                                    | ←    |                                    | ←    |
| TOTAL<br>CLAIMS |          |      |                                    |      |                                    |      |

|                 | AS FILED |      | AFTER<br>1 <sup>st</sup> AMENDMENT |      | AFTER<br>2 <sup>nd</sup> AMENDMENT |      |
|-----------------|----------|------|------------------------------------|------|------------------------------------|------|
|                 | IND.     | DEP. | IND.                               | DEP. | IND.                               | DEP. |
| 51              |          |      |                                    |      |                                    |      |
| 52              |          |      |                                    |      |                                    |      |
| 53              |          |      |                                    |      |                                    |      |
| 54              |          |      |                                    |      |                                    |      |
| 55              |          |      |                                    |      |                                    |      |
| 56              |          |      |                                    |      |                                    |      |
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| 58              |          |      |                                    |      |                                    |      |
| 59              |          |      |                                    |      |                                    |      |
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| 61              |          |      |                                    |      |                                    |      |
| 62              |          |      |                                    |      |                                    |      |
| 63              |          |      |                                    |      |                                    |      |
| 64              |          |      |                                    |      |                                    |      |
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| 66              |          |      |                                    |      |                                    |      |
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| 72              |          |      |                                    |      |                                    |      |
| 73              |          |      |                                    |      |                                    |      |
| 74              |          |      |                                    |      |                                    |      |
| 75              |          |      |                                    |      |                                    |      |
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| 77              |          |      |                                    |      |                                    |      |
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| 79              |          |      |                                    |      |                                    |      |
| 80              |          |      |                                    |      |                                    |      |
| 81              |          |      |                                    |      |                                    |      |
| 82              |          |      |                                    |      |                                    |      |
| 83              |          |      |                                    |      |                                    |      |
| 84              |          |      |                                    |      |                                    |      |
| 85              |          |      |                                    |      |                                    |      |
| 86              |          |      |                                    |      |                                    |      |
| 87              |          |      |                                    |      |                                    |      |
| 88              |          |      |                                    |      |                                    |      |
| 89              |          |      |                                    |      |                                    |      |
| 90              |          |      |                                    |      |                                    |      |
| 91              |          |      |                                    |      |                                    |      |
| 92              |          |      |                                    |      |                                    |      |
| 93              |          |      |                                    |      |                                    |      |
| 94              |          |      |                                    |      |                                    |      |
| 95              |          |      |                                    |      |                                    |      |
| 96              |          |      |                                    |      |                                    |      |
| 97              |          |      |                                    |      |                                    |      |
| 98              |          |      |                                    |      |                                    |      |
| 99              |          |      |                                    |      |                                    |      |
| 100             |          |      |                                    |      |                                    |      |
| TOTAL<br>IND.   |          | ↓    | 6                                  | ↓    |                                    | ↓    |
| TOTAL<br>DEP.   |          | ←    | 33                                 | ←    |                                    | ←    |
| TOTAL<br>CLAIMS |          |      | 39                                 |      |                                    |      |

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